

# Helping Hands 2nd ANNUAL 5K run/1 MILE WALK

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When: September 19, 2015

Location: SMMHC Pavilion 1010 West Columbia Farmington, Mo

Pre-registration at 7:30      Events begin at 9:00

Choose Event      5K \_\_\_\_\_      1-Mile Walk \_\_\_\_\_

Adult Shirt Size: (CIRCLE ONE) S M L XL 2XL

Youth shirt size (Circle one) S M L

Gender: Male / Female (circle one)

Age on date of the run \_\_\_\_\_

Questions contact: Rick Koppeis (573) 218-6147 or Rick.Koppeis@dmh.mo.gov

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ Zip/Postal \_\_\_\_\_

Cell phone: (\_\_\_\_\_) \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**RACE FEE:** Early registration \$25 or \$30 on day of event      (race shirts limited)

## ***RACE WAIVER AND RELEASE***

(Participant must sign in order to be eligible to participate in Race): I understand that my consent to these provisions is given in consideration for being permitted to participate in this Event. I further understand that I may be removed from this competition if I do not follow all the rules of this Event. I am a voluntary participant in this Event, and in good physical condition. I know that this Event is a potentially hazardous activity and I hereby voluntarily assume full and complete responsibility for, and the risk of, any injury or accident that may occur during my participation in this Event or while on the premises of this Event. I, for myself, my next of kin, my minor children that attend the Event, my heirs, administrators, and executors, hereby release and hold harmless and covenant not to file suit against any Event sponsors, the City of Farmington, Southeast Missouri Mental Health Center, Missouri Department of Mental Health, Helping Hands and their agents and employees, and all other persons or entities associated with this Event (collectively, the "Releasees") for any injury or damages I might suffer in connection with my participation in this Event or while on the premises of this Event. This release applies to any and all loss, liability, or claims I may have arising out of my participation in this Event, including but not limited to, personal injury or damage suffered by me or others, whether such losses, liabilities, or claims be caused by falls, contact with and/or the actions of other participants, contact with fixed or non-fixed objects, contact with animals, people, and/or vehicles, conditions of the premises of the Event, negligence of the Releasees, risks not known to me or not reasonably foreseeable at this time, or otherwise. PHOTOGRAPHIC RELEASE: I give my full consent and permission to the Event sponsors, the City of Farmington, their successors, licensees, and assigns the Irrevocable right to use, for any purpose whatsoever and without compensation, any photographs, videotapes, audiotapes, or other recordings of me that are made during the course of this event (the "Event").

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_